## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10707807

|  |  | SMALL ENTITY TYPE (                         |              | OR                    | OTHER THAN<br>OR SMALL ENTITY |                  |                     |                        |    |                     |                        |
|--|--|---|--------------|-----------------------|-------------------------------|------------------|---------------------|------------------------|----|---------------------|------------------------|
| TOTAL CLAIMS   |  |   | 16           |                       |                               |                  | RATE                | FEE                    |    | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED |                       | NUMBER EXTRA                  |                  | BASIC FEE           | 385.00                 | OR | BASIC FEE           | 770.00                 |
| то   | TAL CHARGEA                                    | BLE CLAIMS                                  | ( minus 20=  |                       | *                             |                  | X\$ 9=              | ·                      | OR | X\$18=              |                        |
| IND  | EPENDENT CL                                    | AIMS  | , mii        | nus 3 =               | *                             |                  | X43=                |                        | OR | X86=                |                        |
| MU   | LTIPLE DEPEN                                   | DENT CLAIM PF                               | RESENT       |                       |                               |                  | +145=               |                        | OR | +290=               |                        |
| * If the difference in column 1 is less than zero, enter   |  |   |              |                       | "0" in c                      | olumn 2          | TOTAL               |                        | OR | TOTAL               | 770                    |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  |  |   |              |                       |                               |                  | SMALL E             | NTITY                  | OR | OTHER<br>SMALL      |                        |
| AMENDMENT A  |  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |              | HIGH<br>NUM<br>PREVIO | EST<br>BER<br>DUSLY           | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE | -  | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus        | **                    |                               | =                | X\$ 9=              |                        | OR | X\$18=              |                        |
|  | Independent                                    | *   | Minus        |                       |                               | =                | X43=                |                        | OR | X86=                |                        |
| ٩  | FIRST PRESE                                    | NTATION OF MI                               | JLTIPLE DEF  | PENDENT               | CLAIM                         |                  | +145=               |                        | OR | +290=               |                        |
|  |  |   |              |                       |                               |                  | TOTAL<br>ADDIT. FEE |                        |    | TOTAL<br>ADDIT. FEE |                        |
|  |  | (Column 1)                                  | <del></del>  |                       | mn 2)                         | (Column 3)       |                     |                        |    |                     |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |              | PREVI                 | BER<br>OUSLY<br>FOR           | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus        | **                    |                               | =                | X\$ 9=              |                        | OR | X\$18=              |                        |
|  | Independent                                    | *   | Minus        | ***                   |                               | =                | X43=                |                        | OR | X86=                |                        |
|  | FIRST PRESE                                    | NTATION OF M                                | ULTIPLE DE   | PENDEN'               | T CLAIM                       |                  | +145=               |                        | OR | +290=               |                        |
| Ŷ  |  |   |              |                       |                               |                  | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |              |                       |                               |                  |                     |                        |    |                     |                        |
| AMENDMENT C  |  | CLAIMS REMAINING AFTER AMENDMENT            |              | NUM<br>PREVI          | HEST<br>MBER<br>OUSLY<br>FOR  | PRESENT<br>EXTRA | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus        | **                    | ·                             | =                | X\$ 9=              |                        | OR | X\$18=              |                        |
| ME   | Independent                                    | *   | Minus        | ***                   |                               | =                | X43=                |                        | OR | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                       |                               |                  | +145=               |                        | OR | +290=               |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |              |                       |                               |                  |                     |                        | OR | TOTAL               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE ADDIT. FEE THE ADDIT. FEE ADDIT. FEE ADDIT. FEE THE ADDIT. FEE A |  |   |              |                       |                               |                  |                     |                        |    |                     |                        |